



A-66167-1/ENB

2874\$

CERTIFICATE OF MAILING (37 CFR 1.8(A))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to: Assistant Commissioner of Patents and Trademarks, Washington, D.C. 20231 on December 24, 2003.

Signed:

  
Edward N. BachandIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:  
JOHN H. JERMAN et al.

Serial No. 09/524,727

Filed: March 14, 2000

For: MICROMECHANICAL  
DEVICE

Group Art Unit: 2874

Examiner: PAK, SUNG H

Date: December 24, 2003

RESPONSE TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

- ☒ Amendment;  
☒ a three month extension request is hereby sought;  
☐ Other:

The fees have been calculated as shown below:

	Claims Remaining After Amendment	Minus	Highest Previously Paid For	Present Extra	Small Entity Rate Fee	OR	Other than a Small Entity Rate Fee
Total Claims	31	-	34	0	x 9 = \$		x 18 = \$
Indep Claims	2	-	4	0	x 42 = \$		x 84 = \$
	[ ] Multiple Dependent Claim Presented and Fee not Previously Paid				+140 = \$		+280 = \$
					TOTAL \$-0-		TOTAL \$-0-

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**Total Additional Claims Fee:****\$ - 0 -**

	<u>Small Entity</u>		<u>Large Entity</u>
<input type="checkbox"/> One month	\$ 55.00	<input type="checkbox"/> One month	\$ 110.00
<input type="checkbox"/> Two months	\$210.00	<input type="checkbox"/> Two months	\$ 420.00
<input checked="" type="checkbox"/> Three months	\$475.00	<input type="checkbox"/> Three months	\$ 950.00
<input type="checkbox"/> Four months	\$740.00	<input type="checkbox"/> Four months	\$ 1,480.00
<input type="checkbox"/> Five months	\$1,005.00	<input type="checkbox"/> Five months	\$ 2,010.00

Extension of Time Fee: **\$ 475**☐ Fee regarding Information Disclosure Statement:☐ Fee Under 37 CFR 1.17(p) \$☐ Petition Fee Under 37 CFR 1.17(i) \$Total Information Disclosure Statement Fee: **\$ 0**☐ Other fees (list individually): **\$ 0****Total Other Fees: \$ 0.00****TOTAL FEES: \$ 475.00**☒ A check including the amount of the above indicated TOTAL FEES is attached.☐ Please charge Deposit Account No. 50-2319 in the amount of \$ \_\_\_\_.☐ No fee is required.☒ The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319: (A-66167-1/ENB(468880-74)).

Respectfully submitted,

DORSEY &amp; WHITNEY LLP

By 

Edward N. Bachand

Reg. No. 37,085

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